

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

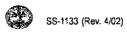
For State and Local Candidates **For Single-Candidate Committees**

1. DATE OF REPORT		2.a. NAME OF C	ANDIDATE OR	COMMITTEE					
1-25-15 Committee to Elect Samuel Blakemore									
2.b. IF COMMITTEE, N	AME OF CANDIDATE	-			3. ELECTION DAT	E	2011		
4.a. CAMPAIGN ADDRE	Blakemore	9			Hugust	7	2014		
Street or Rural Rou		City		State	Zip Code	Phon	e		
	02 C1	hattanoog	a	TN	37401	(433)	355-3570		
4.b. CANDIDATE'S HON Street or Rural Rou	ME ADDRESS (if differen	it than 4.a.)		State	Zip Code	Phon			
404 Tuni		Chatta	nooga	TN	37411	432-	355-357		
5. OFFICE SOUGHT	(include district number, i	f applicable)	6. NAME	OF POLITICAL	TREASURER (may	be candidat	e)		
District	5		Brar	idice 6	areen				
7. CATEGORY OR RE	PORT (Check one)		П						
	ECOND THIRD JARTER QUARTER	FOURTH	PRE- PRIMARY	PRE-	MID-YEAR		AR-END		
8.a. BEGINNING DATE O		QUARTER		GENERAL G DATE OF REPO	SUPPLEMENTA ORTING PERIOD	L SUPP	LEMENTAL		
October 1	, 2014		Janu	ary 1	5, 2015				
9. (Check one)				J					
a. This campa	ign is exempt from detaile	ed disclosure becau	se contribution	s (including in-k	ind) received total \$1	,000 or less	AND expendi-		
	1,000 or less for this repo								
b. This campa and/or expe	ign is required to file a de inditures total more than	stailed financial disc \$1,000 for this report	losure because rting period.	contributions (i	ncluding in-kind) rece	eived total n	nore than \$1,000		
10. I/we do solemnly :	swear or affirm that the i	nformation containe	ed in this camp	aign financial di	sclosure report is tru	e and that	this report is an		
accurate accounting	ng of campaign contributi re Act. Additionally, I/we	ons and expenditure swear or affirm that	es required to to to to to campaign	be reported by the contributions has	ne candidate committe ve been expended for	tee by the C	Campaign		
benefit of the cand	didate or for any other no	npolitical purpose a	s defined by th	e federal interna	revenue code.	or the perso	na manda		
SER OI		1/25/15		Roman	· 1.00		1/2-11-		
signature of ca	andidate	date	4	signature	of political treasurer		1/25/15		
				org/rations	or political troudurer		uate		
11. WITNESS SIGNAT	URE			21	1				
Show 7	-0.4	1-25-L	5 -	5	. 21.1		1.20.104		
signature of v	vitness	date		Men	TUM Sture of witness		1-25-15		
signature of v	nuless	date		signa	ture of witness		date		
12. SUMMARY									
a. BALANCE ON	HAND LAST REPORT				s 0.00				
b. TOTAL RECEIP	PTS THIS PERIOD				\$ _0.00				
c. TOTALDISBUF	RSEMENTS THIS PERIOD				5_0.00				
				***************************************		_			
d. BALANCE ON	I HAND (12.a. plus 12.b.	minus 12.c.)		***************************************	*************************	s_ C	0.00		
e. TOTAL LOANS	SOUTSTANDING					. 0	00		
e. TOTAL LUANS	7 CO TO TAINDING		O •C 11H	3S MAL 810	7	s_U.			
f. TOTAL OBLIG	ATIONS OUTSTANDING.)	N :D MA	JO 1171 -11		s O.	00		
		NO.	HSSIWHO	ECTION C					
		110	COUNTY	HAMILTON		7			



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVI	ERING THE PERIOD					
Committee to Elect Samuel Blakemore	FROM:10/1/14	TO: 1/15/15					
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	•						
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>0.00</u>	_					
b. Itemized Contributions (over \$100 from each source this period)		_					
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		\$ <u>0.00</u>					
16. LOANS RECEIVED THIS REPORTING PERIOD		\$ 0.00					
17. INTEREST RECEIVED THIS REPORTING PERIOD	17. INTEREST RECEIVED THIS REPORTING PERIOD						
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		\$ <u>0.00</u>					
DISBURSEMENTS							
19. EXPENDITURES (other than loan payments)							
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	e.g., printing, postage,	gasoline)					
\$							
\$							
\$							
<u></u>							
\$							
\$							
\$							
Total of Expenditures (\$100 or less each payee)	\$ <i>0.00</i>						
		_					
b. Itemized Expenditures (Over \$100 each payee this period)							
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)							
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		_					
22.IN-KIND CONTRIBUTIONS		s <u>0.00</u>					
	• 000						
a. Unitemized in-kind contributions (\$100 or less from each source this period)	_	_					
b. Itemized in-kind contributions (over \$100 from each source this period)	-	- 000					
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.t.).)	\$ <u>0.00</u>					
23. OBLIGATIONS	s 0.00						
a. Unitemized Obligations Outstanding (\$100 or less each)		_					
b. Itemized Obligations Outstanding (Over \$100 each)		- s 0.00					



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR	COMMITTEE			RING THE PERIOD
Committee	to elect de	amuel	Blakemore FROM:10/1/1	
			PAGE (enter \$0 if first itemized page)	A 0.00
COMPLETE THE APPROPRIAT			N (contributions totaling more than \$100 from any contribu-	
First Name	Middle Nam	e	Contribution Received For:	Amount of Contribution
ast Name/Organization Name	· · · · · · · · · · · · · · · · · · ·		Primary Election General Election	
4dcress	A STATE OF THE PARTY OF THE PAR		Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution	Aggregate This Election
Occupation		<u> </u>		
Employer	and the same and the same of t	· · · · · · · · · · · · · · · · · · ·		
First Name	Middle Nar	ne .	Contribution Received For:	Amount of Contribution
Last Name/Organization Name			Primary Election General Election	
Adoress		, , , , , , , , , , , , , , , , , , ,	Runoff (Local Elections Only)	
City	State	Zin Code	Date of Contribution	Aggregate This Election
Occupator:		<u> </u>		, ang sa monaghara (IA)
Errokoyer				Stocker
sub-goodgete				
First Name	Middle Nan	ne	Contribution Received For	Amount of Contribution
Last Name/Organization Name			Primary Election General Election	10 mm
Acdress			Runoff (Local Elections Only)	71.0 m o m o m o m o m o m o m o m o m o m
Caty	State	Zip Code	Date of Contribution	Aggregate This Election
Docupation	1 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		·	
Employer		<u> </u>		A. C.
*	Fast / a'			
First Name	Mixile Na	THE	Contribution Received For:	Amount of Contribution
Last Name/Organization Name			Primary Election General Election	**************************************
Address		· · · · · · · · · · · · · · · · · · ·	Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution	Aggregate This Election
Occupation				
Епроуег				
programmer and the second seco	SAUTIONA			
	RIBUTIONS wage if additional pages of this form tions, this amount must be shown i		12	#0.00
to any is the May refle to countries.	uumo, liina eritoont must de siitaan i	committee (1965)	7 /	

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR CO Committee to	MMITTEE	+ 5	amuel t	3/akemore PROM/	DR7 COVERING THE PERIOD 0/1/14 TO 1/15/15			
3. TOTAL ITEMIZED IN-KIND CON					Angunt 0.00			
4 COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (vi-kind contributions totaling more than \$100 from any contributor during the period)								
First Name Medite Name			***	In-Kind Contribution Received For: Plumary Election	Value of In-Kind Contribution			
Last Name/Organization Name		••		Runoff (Local Elections Only)				
463(85)	- <u></u>		rit	Date of in-Kind Contribusion	Aggregate this Election			
City State Zin Code			Zip Code	Description of in-Kind Contribution	The second secon			
Cocupation	subation Employer			The state of the s				
First Name	<u> </u>	Middle Nat	pe.	In-Kind Contribution Received For:	Value of In-Kind Contribution			
Last Name/Organization Name		<u> </u>		Primary Election General Runoff (Loca: Elections Only)	EASCROT			
<u> ಸಿರೆದೇಕಕ</u>				Eale of Shi Kind Contribution	Aggregate this Becton			
City	**************************************	State	Zip Code	Description of tr-Kind Contribution				
Scalegion	Errakoyer	<u> </u>						
				D-16-32				
First Name	· • • • • • • • • • • • • • • • • • • •	Mode Nar	7)8	In-Kind Contribution Received For: Primary Electron General	Value of In-Kind Contribution Stection			
Last Name/Organization Name				☐ Runoff (Lecal Elections Only)				
ALCONECE				Date of in-King Contribution	Aggregate this Becaco			
*		State	Zip Code	Description of in Kind Contribution	AND CONTRACT OF THE STATE OF TH			
Competer	Employer							
First Name		Middle Nai	re	In-Kind Contribution Received For	Value of in-Kind Contribution			
Last Name/Organization Name		•		Primary Electron General				
			· · · · · · · · · · · · · · · · · · ·	Rumoff (Local Elections Only)				
Address			· · · · · · · · · · · · · · · · · · ·	Date of in Kerd Contributor	Agreças às Eeton			
Wy		State	Zesos	Description of its Kind Contribution				
Compalies	Employer							
Sirst Name		Middle Man	No.	In-Kind Continuation Received For:	Value of in-Kind Contribution			
Last Namer Organizator Name		7		Primary Election General Runoff (Local Elections Only)	III (BOCULON)			
Address			Section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a second section in the second section in the second section is a section section in the second section in the section is a section section in the section is a section section in the section in the section is a section section in the section section in the section is a section section in the section section in the section section in the section section is a section secti	Sate of in-King Contribution	Aggregate this Election			
î-dîş		State	Zp Code	Description of in-Kind Controllor				
Ссиравал	Employer	!						
5 TOTAL ITEMIZED IN-KIND CO	NTRIBUTIO	NS.						
(Cerry forward to nem 3 of next page 8 a filtris is the last page of in-kind contribu	additional pages	or this form a		k)	\$0.00			
774 SS_1128 (Par: 208)	** ***			· · · · · · · · · · · · · · · · · · ·				

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE TO ELE	n4	Camus/ 6	210 4000000	2. REPORT COVER FROM: 10/1/14	TO: 1/1-/-	
				10/7/19	Amount 0.00	
TOTAL ITEMIZED CAMPAIGN EXPENDITU COMPLETE THE APPROPRIATE ITEMS FOR E				ge) to any pavee during the peri	ind)	
First Name	Middle Na		Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name						
Address]			
City	State	Zip Code				
First Name Middle Name			Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address			1			
City	State	Zip Code	1			
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name		1				
Address]			
City	State	Zip Code				
First Name Middle Name			Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name			1			
Address]			
City	State	Zip Code			, 1	
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name				= =		
Address						
City	State	Zip Code				
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount mus					#0.00	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1 NAME OF CANDID	ATE OR COMMITTEE	-					10	DEDODE	001/5	2010	
1. NAME OF CANDIDATE OR COMMITTEE								2. REPORT COVERING THE PERIOD FROM: TO:			
Committee to Elect Samuel Blakemore 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from a							10	/1/14	f	10.	15/15
3. COMPLETE THE AF	PPROPRIATE ITEMS	FOR EACH	ITEMIZ	ZED LOAN	(loans totaling n	nore than \$1	00 from any source	e during the pe	eriod)	1.	,,,,,,
Complete the Following fo	r the Source of the Loar	1									
First Name										g Loan Balance	
Last Name/Organization Name				(Beginning	of Period) Received			Payments		(End of Period)	
Last Namo Organization Nam											
Address				Loan Receiv	ed For:			Date of Loa	an		
City	State	Zip Code		☐ Primar	Election	☐ Gener	al Election				
S.I.y	Otalo	210 0000		☐ Runoff	Runoff (Local Elections Only)						
	List All End	orsers or Guar	antors fo	or Above Loa	n (If more spa	ce is need	ed please attach	a page)			
First Name		Middle Nam	е		First Name				Middle	e Name	
Last Name/Organization Name	9				Last Name/Org	ganization Na	ame				
Address					Address						
City		State	Zip Co	ode	City				State		Zip Code
Amount Guaranteed Outstandi	na				Amount Curren	-110-1-1	-4				• 22323
Amount Guaranteed Outstandi	ng				Amount Guara	nteed Outsta	naing				
First Name Middle Name					First Name Middle Name						
Last Name/Organization Name					Last Name/Organization Name						
Address					Address						
City		State	Zip Co	ode	City State Zip Code					Zip Code	
Amount Guaranteed Outstandin	ng				Amount Guarar	nteed Outsta	nding				
First Name		Middle Name			First Name				Middl	le Name	
Last Name/Organization Name					Last Name/Organization Name						
Address					Address						
City		State	Zip Co	ode	City				State		Zip Code
Amount Guaranteed Outstandin	ng		1		Amount Guaran	iteed Outstar	nding				
First Name		Middle Name			First Name				Middle	Name	
Last Name/Organization Name					Last Name/Org	anization Na	me				
Address					Address						
City		State	Zip Co	de	City				State		Zip Code
Amount Guaranteed Outstandin	ng				Amount Guaran	teed Outstar	nding		•		
4. Totals for all Loans (co					Outstanding Lo		Loans	Loa			anding Loan Balance
(Total loans received should a (Total loan payments should a (Total outstanding loan balance	also be shown in item 20. on	summary page.)		(Beginning o	r Period)	Received	Paym	ents		End of Period)
, said and a said			390./							1	



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

NAME OF CANDIDATE OR COMMITTE	EE			2. REPORT CO	VERING THE PER	RIOD
Committee to Elect Samuel Bld 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED			lakemore	FROM: /0//	//4 TO: /	15/15
COMPLETE THE APPROPRIATE ITEM OBLIGATION (obligations totaling more person/vendor at the end of the reporting	than \$100 ov	H ITEMIZED ved to any	Outstanding Balance (Beginning of Period)	Debt Incurred	Payments This Period	Outstanding Balance (End of Period)
First Name	Middle Name					
Last Name/Business Name			\dashv			
Address			\dashv			
City	State	Zip Code	-			
Description of Obligation						
First Name	Middle N	ame	1			
Last Name/Business Name			\dashv			
Address			\dashv			
City	State	Zip Code	7			
Description of Obligation		1		1		
First Name	Middle Na	ame				
Last Name/Business Name			_			
Address						
City	State	Zip Code				
Description of Obligation		•	•			
First Name	Middle Na	ame				
Last Name/Business Name						
Address						
City	State	Zip Code	_			
Description of Obligation						
First Name	Middle N	ame				
Last Name/Business Name						
Address						
City	State	Zip Code	7			
Description of Obligation				1		
4. TOTALS	-01	atalaa t	#			H
(Total from Outstanding Balance - (End of Perior in item 23b. on summary page.)	oa) column mu	ist also be shown	\$0.00			\$0.00